PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-784-200

		SMALL ENTITY				OTHER	ED TUAN						
_	· · · · · · · · · · · · · · · · · · ·		(Column 1)		(Column 2)			TYPE		OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			4					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR		 	
TOTAL CHARGEABLE CLAIMS			minus 20=		• 0			X\$ 9=	1.	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		* 0			X43=	·	7	Voc		
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	 -	OR			
* J	f the difference	e in column 1 is	less than z	ero, enter	"0" in c	0" in column 2		TOTAL		OR	L		
		CI AIMS AS A	MENDED - PART II				TOTAL	<u> </u>	JOR	TOTAL	170		
_	<u> </u>	(Column 1)		(Colum	nn 2)	(Column 3)	_	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		1	+290=		
								TOTAL	 	OR	TOTAL	:	
(Column 1) (Column 2) (Column 3)								DDIT. FEE	L	JOR .	ADDIT. FEE		
		CLAIMS	Γ –	HIGHE		(Column 3)	1 -						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	, .	OR	X\$18=		
	Independent	*	Minus	***		=	╽┋	X43=	. •		X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┞			OR	700=		
								+145=		OR	+290=		
							. AI	TOTAL ODIT. FEE	·	OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Column	n 2) ((Column 3)	• •		÷				
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	上	X43=		.	V00		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\perp	A43=		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.								+145=	·	OR	+290=		
II	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
T	he *Highest Num	ber Previously Paid	For (Total or	Independent) is the h	ighest number	found	I in the appi	opriate box	in colu	mn 1.		